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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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	Office Use Only	



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ALLAHASSEE, FLOREIA

T. Burch FFB 142

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

, #_{.,}

SUBJECT: Hessler Group (PROPOSED CORPORATE NAME)	Inc.			
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of in	corporation and a check for:			
	70.75			
	78.75			
	rtified Copy Certified Copy			
de Certificate of Status	& Certificate of			
į į	Status			
ADE	ITIONAL COPY REQUIRED			
<u></u>				
mar Kinghandy C Harlan				
FROM: Kimberly C. Hessler Name (Printed or typed)				
187 Dragonfly Dr.				
J Address/				
Titusville FL City State & Zi	32 180			
(321) 267-5154 Davime Telephone number				
<u> </u>	•			
	•			

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
ARTICLE I NAME The name of the corporation shall be: Hessler Group Inc. 2007
ARTICLE II PRINCIPAL OFFICE
SSE OF L
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: 187 Dragon fly Dr.
The principal place of business/mailing address is: 187 Dragon fly Dr. 99 Titusville, FL 32780
The number for which the compression is expenienced in:
The purpose for which the corporation is organized is: Consulting and Managen
ADDICE FOR CHADIS
The number of shares of stock is: 1000 (and the number of shares of stock is:
The number of shares of stock is: 1000 (one thousand)
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Rimberly C. Hessier
List name(s), address(es) and specific title(s): Kimberly C. Hessler 187 Dragonfly Dr.
Titusville, FL 32780
President, Secretary
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Kimberly C. Hessler
187 Dragonfly Dr.
ARTICLE VII INCORPORATOR TITUSVILLE, FL 32780
AMELICAN VII. INCOME CHARLES
The <u>name and address</u> of the Incorporator is:
Kimberly Ci Hessler 187 Oragonfly Or. Titusxille FL 32780
187 Oragon fly Or.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
X Ximberly C. Hossler
Signature/Registered Agent Date
X Kimber & Mesola 1/30/06
Signature/Incorporator Date
J. G. Horizon

4 . ⁴.

ARTICLES OF INCORPORATION